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7590

07/27/2004

William Squire, Esq.
c/o Carella, Byrne, Bain, Gilfillan, Cecchi,
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Janice Speidel	(Depositor's name)
<i>Janice Speidel</i>	(Signature)
October 26, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/005,238	12/05/2001	Lawrence A. Shimp	\$25400-208	8543

TITLE OF INVENTION: SPINAL INTERVERTEBRAL IMPLANT, INTERCONNECTIONS FOR SUCH IMPLANT AND PROCESSES FOR MAKING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$666 495	\$300	\$966 795	10/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLSE, DAVID H	3738	623-017160

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Carella Byrne Bain
Gilfillan Stewart et al
2 Elliot M. Olstein
3 William Squire

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Osteotech, Inc.

Eatontown, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

William Squire

(Date)

10/26/04

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